

**FEC
FORM 3X****REPORT OF RECEIPTS
AND DISBURSEMENTS**
For Other Than An Authorized Committee

Office Use Only

1. NAME OF COMMITTEE (in full) TYPE OR PRINT ▼ Example: If typing, type over the lines.

12FE4M5

Leadership That Listens PAC

ADDRESS (number and street) ▼

P.O. Box 44084

☐ Check if different than previously reported. (ACC)

Fort Washington

MD

20749

2. FEC IDENTIFICATION NUMBER ▼

CITY ▲

STATE ▲

ZIP CODE ▲

C C00456905

3. IS THIS
REPORT☒NEW
(N)

OR

☐AMENDED
(A)

4. TYPE OF REPORT

(Choose One)

(a) Quarterly Reports:

☐ April 15
Quarterly Report (Q1)☐ July 15
Quarterly Report (Q2)☐ October 15
Quarterly Report (Q3)☐ January 31
Year-End Report (YE)☐ July 31 Mid-Year
Report (Non-election
Year Only) (MY)☐ Termination Report
(TER)(b) Monthly
Report
Due On:☐ Feb 20 (M2)☐ May 20 (M5)☐ Aug 20 (M8)☐ Nov 20 (M11)
(Non-Election
Year Only)☐ Mar 20 (M3)☐ Jun 20 (M6)☐ Sep 20 (M9)☐ Dec 20 (M12)
(Non-Election
Year Only)☐ Apr 20 (M4)☐ Jul 20 (M7)☐ Oct 20 (M10)☐ Jan 31 (YE)

(c) 12-Day

PRE-Election

Report for the:

☐ Primary (12P)☐ Convention (12C)☐ General (12G)☐ Special (12S)☐ Runoff (12R)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

(d) 30-Day

POST-Election

Report for the:

☒ General (30G)☐ Runoff (30R)☐ Special (30S)

Election on

M M M /

D D D /

Y Y Y Y Y Y Y Y

in the
State of

MD

5. Covering Period

M M M /

D D D /

Y Y Y Y Y Y Y Y

through

M M M /

D D D /

Y Y Y Y Y Y Y Y

I certify that I have examined this Report and to the best of my knowledge and belief it is true, correct and complete.

Type or Print Name of Treasurer Mr. Jeremiah B Pope

Signature of Treasurer

Mr. Jeremiah B Pope

[Electronically Filed]

Date

M M M /

D D D /

Y Y Y Y Y Y Y Y

NOTE: Submission of false, erroneous, or incomplete information may subject the person signing this Report to the penalties of 2 U.S.C. §437g.

Office
Use
Only**FEC FORM 3X**
Rev. 12/2004

SUMMARY PAGE OF RECEIPTS AND DISBURSEMENTS

FEC Form 3X (Rev. 02/2003)

Page 2

Write or Type Committee Name

Leadership That Listens PAC

Report Covering the Period: From: M M / D D / Y Y Y Y Y 10 / 16 / 2014 To: M M / D D / Y Y Y Y Y 11 / 24 / 2014

	COLUMN A This Period	COLUMN B Calendar Year-to-Date
6. (a) Cash on Hand January 1, Y Y Y Y Y 2014		4251.41
(b) Cash on Hand at Beginning of Reporting Period.....	6313.91	
(c) Total Receipts (from Line 19)	23551.00	89301.00
(d) Subtotal (add Lines 6(b) and 6(c) for Column A and Lines 6(a) and 6(c) for Column B).....	29864.91	93552.41
7. Total Disbursements (from Line 31)	14667.46	78354.96
8. Cash on Hand at Close of Reporting Period (subtract Line 7 from Line 6(d))	15197.45	15197.45
9. Debts and Obligations Owed TO the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	
10. Debts and Obligations Owed BY the Committee (Itemize all on Schedule C and/or Schedule D)	0.00	



This committee has qualified as a multicandidate committee. (see FEC FORM 1M)

For further information contact:

Federal Election Commission
999 E Street, NW
Washington, DC 20463

Toll Free 800-424-9530
Local 202-694-1100

DETAILED SUMMARY PAGE of Receipts

FEC Form 3X (Rev. 06/2004)

Page 3

Write or Type Committee Name

Leadership That Listens PAC

Report Covering the Period:

From:

M M M	/	D D D	/	Y Y Y Y Y Y
10		16		2014

To:

M M M	/	D D D	/	Y Y Y Y Y Y
11		24		2014

I. Receipts
COLUMN A
Total This Period

COLUMN B
Calendar Year-to-Date

11. Contributions (other than loans) From:

(a) Individuals/Persons Other

Than Political Committees

(i) Itemized (use Schedule A).....

11000.00

53250.00

(ii) Unitemized

51.00

51.00

(iii) TOTAL (add

Lines 11(a)(i) and (ii)..... ▶

11051.00

53301.00

(b) Political Party Committees

0.00

0.00

(c) Other Political Committees

(such as PACs).....

12500.00

36000.00

(d) Total Contributions (add Lines

11(a)(iii), (b), and (c)) (Carry

Totals to Line 33, page 5)

23551.00

89301.00

12. Transfers From Affiliated/Other

Party Committees.....

0.00

0.00

13. All Loans Received

0.00

0.00

14. Loan Repayments Received.....

0.00

0.00

15. Offsets To Operating Expenditures

(Refunds, Rebates, etc.)

(Carry Totals to Line 37, page 5).....

0.00

0.00

16. Refunds of Contributions Made

to Federal Candidates and Other

Political Committees.....

0.00

0.00

17. Other Federal Receipts

(Dividends, Interest, etc.).....

0.00

0.00

18. Transfers from Non-Federal and Levin Funds

(a) Non-Federal Account

(from Schedule H3)

0.00

0.00

(b) Levin Funds (from Schedule H5)

0.00

0.00

(c) Total Transfers (add 18(a) and 18(b))..

0.00

0.00

19. Total Receipts (add Lines 11(d),
12, 13, 14, 15, 16, 17, and 18(c))..... ▶

23551.00

89301.00

20. Total Federal Receipts

(subtract Line 18(c) from Line 19)

23551.00

89301.00

DETAILED SUMMARY PAGE

of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 4

II. Disbursements	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
21. Operating Expenditures:		
(a) Allocated Federal/Non-Federal Activity (from Schedule H4)		
(i) Federal Share	0.00	0.00
(ii) Non-Federal Share.....	0.00	0.00
(b) Other Federal Operating Expenditures	3917.46	11888.96
(c) Total Operating Expenditures (add 21(a)(i), (a)(ii), and (b))	3917.46	11888.96
22. Transfers to Affiliated/Other Party Committees.....	0.00	0.00
23. Contributions to Federal Candidates/Committees and Other Political Committees.....	10750.00	65466.00
24. Independent Expenditures (use Schedule E)	0.00	0.00
25. Coordinated Party Expenditures (2 U.S.C. §441a(d)) (use Schedule F).....	0.00	0.00
26. Loan Repayments Made.....	0.00	0.00
27. Loans Made.....	0.00	0.00
28. Refunds of Contributions To:		
(a) Individuals/Persons Other Than Political Committees	0.00	0.00
(b) Political Party Committees	0.00	0.00
(c) Other Political Committees (such as PACs).....	0.00	0.00
(d) Total Contribution Refunds (add Lines 28(a), (b), and (c)).....	0.00	0.00
29. Other Disbursements	0.00	1000.00
30. Federal Election Activity (2 U.S.C. §431(20))		
(a) Allocated Federal Election Activity (from Schedule H6)		
(i) Federal Share	0.00	0.00
(ii) "Levin" Share.....	0.00	0.00
(b) Federal Election Activity Paid Entirely With Federal Funds	0.00	0.00
(c) Total Federal Election Activity (add .. Lines 30(a)(i), 30(a)(ii) and 30(b))....	0.00	0.00
31. Total Disbursements (add Lines 21(c), 22, 23, 24, 25, 26, 27, 28(d), 29 and 30(c)) ..	14667.46	78354.96
32. Total Federal Disbursements (subtract Line 21(a)(ii) and Line 30(a)(ii) from Line 31).....	14667.46	78354.96

DETAILED SUMMARY PAGE
of Disbursements

FEC Form 3X (Rev. 02/2003)

Page 5

III. Net Contributions/Operating Expenditures	COLUMN A Total This Period	COLUMN B Calendar Year-to-Date
33. Total Contributions (other than loans) (from Line 11(d), page 3)	23551.00	89301.00
34. Total Contribution Refunds (from Line 28(d))	0.00	0.00
35. Net Contributions (other than loans) (subtract Line 34 from Line 33)	23551.00	89301.00
36. Total Federal Operating Expenditures (add Line 21(a)(i) and Line 21(b)) ►	3917.46	11888.96
37. Offsets to Operating Expenditures (from Line 15, page 3).....	0.00	0.00
38. Net Operating Expenditures (subtract Line 37 from Line 36) ►	3917.46	11888.96

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☒ 11a ☐ 11b ☐ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Leadership That Listens PAC

Full Name (Last, First, Middle Initial)

A. Mr. Michael Kieschnick

Mailing Address 1467 Hamilton

City

Palo Alto

State

CA

Zip Code

94301

FEC ID number of contributing
federal political committee.

C

Name of Employer

Credo Mobile

Occupation

Manager

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

1000.00

Date of Receipt

11 / 06 / 2014

Transaction ID : SA11AI.5490

Amount of Each Receipt this Period

1000.00

Contribution

Full Name (Last, First, Middle Initial)

B. Ms. Mary Ann Stein

Mailing Address 5643 Bent Branch Rd.

City

Bethesda

State

MD

Zip Code

20816

FEC ID number of contributing
federal political committee.

C

Name of Employer

Moriah Fund

Occupation

Attorney

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

11 / 06 / 2014

Transaction ID : SA11AI.5478

Amount of Each Receipt this Period

5000.00

Contribution

Full Name (Last, First, Middle Initial)

C. Mr. Henry Scott Wallace

Mailing Address 6901 Mountain Gate Dr.

City

Bethesda

State

MD

Zip Code

20817

FEC ID number of contributing
federal political committee.

C

Name of Employer

Self Employed

Occupation

Nonprofit Director

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

10 / 30 / 2014

Transaction ID : SA11AI.5476

Amount of Each Receipt this Period

5000.00

Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

11000.00

11000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 12
☐ 13 ☐ 14 ☐ 15 ☐ 16 ☐ 17

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NAME OF COMMITTEE (In Full)

Leadership That Listens PAC

Full Name (Last, First, Middle Initial)

A. DRIVE Committee - FEC ID# C00032979

Mailing Address 25 Louisiana Avenue NW

City State Zip Code
Washington DC 20001

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

11 / 04 / 2014

Transaction ID : SA11C.5471

Amount of Each Receipt this Period

2500.00

PAC Contribution

Full Name (Last, First, Middle Initial)

B. LEAGUE OF CONSERVATION VOTERS ACTION FUND

Mailing Address 1920 L ST NW SUITE 800

City State Zip Code
WASHINGTON DC 20036

FEC ID number of contributing
federal political committee.

C C00252940

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

2500.00

Date of Receipt

11 / 17 / 2014

Transaction ID : SA11C.5469

Amount of Each Receipt this Period

2500.00

PAC Contribution

Full Name (Last, First, Middle Initial)

C. LIUNA PAC FEC ID# C00007922

Mailing Address 905 16th Street NW

City State Zip Code
Washington DC 20006

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

10 / 21 / 2014

Transaction ID : SA11C.5473

Amount of Each Receipt this Period

5000.00

PAC Contribution

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

10000.00

SCHEDULE A (FEC Form 3X) **ITEMIZED RECEIPTS**

Use separate schedule(s)
for each category of the
Detailed Summary Page

FOR LINE NUMBER:
(check only one)

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☐ 11a ☐ 11b ☒ 11c ☐ 12
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NAME OF COMMITTEE (In Full)

Leadership That Listens PAC

Full Name (Last, First, Middle Initial)

A. RAYTHEON COMPANY POLITICAL ACTION COMMITTEE

Mailing Address 1100 WILSON BLVD
SUITE 1500

City State Zip Code
ARLINGTON VA 22209

FEC ID number of contributing
federal political committee.

C C00097568

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

5000.00

Date of Receipt

M M / D D / Y Y Y Y Y Y
10 / 30 / 2014

Transaction ID : SA11C.5475

Amount of Each Receipt this Period

2500.00

PAC Contribution

Full Name (Last, First, Middle Initial)

B.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

FEC ID number of contributing
federal political committee.

C

Name of Employer

Occupation

Receipt For:

☐ Primary ☐ General
☐ Other (specify) ▼

Aggregate Year-to-Date ▼

Date of Receipt

M M / D D / Y Y Y Y Y Y

Amount of Each Receipt this Period

SUBTOTAL of Receipts This Page (optional)..... ►

TOTAL This Period (last page this line number only)..... ►

2500.00

12500.00

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input checked="" type="checkbox"/> 21b	<input type="checkbox"/> 22	<input type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Leadership That Listens PAC

Full Name (Last, First, Middle Initial)

A. ACTBLUE

Mailing Address P.O. Box 382110

City	State	Zip Code
Cambridge	ME	02238-2110

Purpose of Disbursement
Fundraising Expense

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:

Disbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		31		2014

Transaction ID : SB21B.5491

Amount of Each Disbursement this Period

239.03

Full Name (Last, First, Middle Initial)

B. Mr. Jeremiah B Pope

Mailing Address 10503 Sweetbriar Parkway

City	State	Zip Code
Silver Spring	MD	20903

Purpose of Disbursement
Fundraising Consultant

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:

Disbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		01		2014

Transaction ID : SB21B.5507

Amount of Each Disbursement this Period

2205.10

Full Name (Last, First, Middle Initial)

C. Mr. Jeremiah B Pope

Mailing Address 10503 Sweetbriar Parkway

City	State	Zip Code
Silver Spring	MD	20903

Purpose of Disbursement
Fundraising Consultant

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President
State:	District:

Disbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		01		2014

Transaction ID : SB21B.5508

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2694.13

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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☒ 21b ☐ 22 ☐ 23 ☐ 24 ☐ 25 ☐ 26
☐ 27 ☐ 28a ☐ 28b ☐ 28c ☐ 29 ☐ 30b

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NAME OF COMMITTEE (In Full)

Leadership That Listens PAC

Full Name (Last, First, Middle Initial)

A. Post Office

Mailing Address Fort Washinton PO

City Fort Washington State MD Zip Code 20744

Purpose of Disbursement
Post Office Box Fee

001

Candidate Name

Category/
Type
Office Sought: ☐ House
 ☐ Senate
 ☐ President

Disbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 16 / 2014
Transaction ID : SB21B.5544

Amount of Each Disbursement this Period

128.00

Full Name (Last, First, Middle Initial)

B. Prince George's County Democratic Party

Mailing Address 401 Elara Court

City Upper Marlboro State MD Zip Code 20774

Purpose of Disbursement
ContributionCategory/
Type

Candidate Name

Office Sought: ☐ House
 ☐ Senate
 ☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y
10 / 20 / 2014
Transaction ID : SB21B.5494

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C.

Mailing Address

City State Zip Code

Purpose of Disbursement

Category/
Type

Candidate Name

Office Sought: ☐ House
 ☐ Senate
 ☐ President

Disbursement For:
☐ Primary ☐ General
☐ Other (specify) ▼

State: District:

Date of Disbursement

M M M / D D D / Y Y Y Y Y Y

Amount of Each Disbursement this Period

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1128.00

3822.13

**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

PAGE 11 OF 20

<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Leadership That Listens PAC

Full Name (Last, First, Middle Initial)

A. APPEL FOR IOWA, INC.

Mailing Address PO BOX 702

City	State	Zip Code
DES MOINES	IA	50303

Purpose of Disbursement
Campaign Contribution

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: IA	District: 03

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : SB23.5533

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. BERA FOR CONGRESS

Mailing Address Post Office Box 582496

City	State	Zip Code
Elk Grove	CA	95758

Purpose of Disbursement
Campaign Contribution

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: CA	District: 03

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : SB23.5515

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C. BRAD ASHFORD FOR CONGRESS

Mailing Address 7926 SHIRLEY CIR

City	State	Zip Code
OMAHA	NE	68124

Purpose of Disbursement
Campaign Contribution

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: NE	District: 02

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : SB23.5543

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

750.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Leadership That Listens PAC

Full Name (Last, First, Middle Initial)

A. Cain for Congress

Mailing Address P.O. Box 1523

City	State	Zip Code
Bangor	ME	04402

Purpose of Disbursement
Campaign Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : SB23.5531

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. Collin Peterson for Congress

Mailing Address PO Box 265

City	State	Zip Code
Detroit Lakes	MN	56502

Purpose of Disbursement
Campaign Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: District:

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : SB23.5501

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. ENYART FOR CONGRESS

Mailing Address PO BOX 308

City	State	Zip Code
BELLEVILLE	IL	62222

Purpose of Disbursement
Campaign Contribution

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: IL District: 12

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : SB23.5525

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Leadership That Listens PAC

Full Name (Last, First, Middle Initial)

A. Friends of Mary Landrieu

Mailing Address PO Box 50098

City
New OrleansState
LAZip Code
70150Purpose of Disbursement
Campaign Contribution

Candidate Name

Office Sought: ☐ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☐ General
☒ Other (specify) ▼

State: District:

Runoff

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
11		13		2014

Transaction ID : SB23.5509

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

B. GRAHAM FOR CONGRESS

Mailing Address PO BOX 310

City
TALLAHASSEEState
FLZip Code
32302Purpose of Disbursement
Campaign Contribution

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State: FL District: 02

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : SB23.5528

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C. HORSFORD FOR CONGRESSMailing Address 6100 ELTON AVE.
SUITE 1000City
LAS VEGASState
NVZip Code
89107Purpose of Disbursement
Campaign Contribution

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ President

Disbursement For: 2014

☐ Primary ☒ General
☐ Other (specify) ▼

State: NV District: 04

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		23		2014

Transaction ID : SB23.5496

Amount of Each Disbursement this Period

1000.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

2250.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Leadership That Listens PAC

Full Name (Last, First, Middle Initial)

A. HORSFORD FOR CONGRESSMailing Address 6100 ELTON AVE.
SUITE 1000

City LAS VEGAS State NV Zip Code 89107

Purpose of Disbursement
Campaign Contribution

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ President
State: NV District: 04Disbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : SB23.5524

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. JAMES LEE WITT FOR CONGRESS

Mailing Address PO BOX 36

City DARDANELLE State AR Zip Code 72834

Purpose of Disbursement
Campaign Contribution

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ President
State: AR District: 04Disbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : SB23.5539

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C. JOHN FOUST FOR CONGRESS

Mailing Address PO BOX 962

City MCLEAN State VA Zip Code 22101

Purpose of Disbursement
Campaign Contribution

Candidate Name

Office Sought: ☒ House
☐ Senate
☐ President
State: VA District: 10Disbursement For: 2014
☐ Primary ☒ General
☐ Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : SB23.5537

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

750.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Leadership That Listens PAC

Full Name (Last, First, Middle Initial)

A. JULIA BROWNLEY FOR CONGRESS

Mailing Address 728 W EDNA PLACE

City	State	Zip Code
COVINA	CA	91722

Purpose of Disbursement
Campaign Contribution

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: CA District: 00

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : SB23.5523

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. KATHLEEN RICE FOR CONGRESS

Mailing Address 410 JERICO TURNPIKE SUITE 200

City	State	Zip Code
JERICO	NY	11753

Purpose of Disbursement
Campaign Contribution

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: NY District: 04

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : SB23.5541

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C. KIRKPATRICK FOR ARIZONA

Mailing Address PO Box 993

City	State	Zip Code
Prescott	AZ	86302

Purpose of Disbursement
Campaign Contribution

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: AZ District: 01

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : SB23.5517

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

750.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Leadership That Listens PAC

Full Name (Last, First, Middle Initial)

A. KUSTER FOR CONGRESS

Mailing Address P.O. Box 1498

City	State	Zip Code
Concord	NH	03302

Purpose of Disbursement
Campaign Contribution

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: NH District: 02

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : SB23.5516

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. LOEBSACK FOR CONGRESS

Mailing Address PO BOX 3013

City	State	Zip Code
IOWA CITY	IA	52244

Purpose of Disbursement
Campaign Contribution

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: IA District: 02

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		23		2014

Transaction ID : SB23.5497

Amount of Each Disbursement this Period

1000.00

Full Name (Last, First, Middle Initial)

C. LOEBSACK FOR CONGRESS

Mailing Address PO BOX 3013

City	State	Zip Code
IOWA CITY	IA	52244

Purpose of Disbursement
Campaign Contribution

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: IA District: 02

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : SB23.5511

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional).....▶**TOTAL** This Period (last page this line number only).....▶

1500.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Leadership That Listens PAC

Full Name (Last, First, Middle Initial)

A. MOULTON FOR CONGRESS COMMITTEE

Mailing Address PO BOX 2013

City	State	Zip Code
SALEM	MA	01970

Purpose of Disbursement
Campaign Contribution

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: MA	District: 06

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : SB23.5534

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. Nick Rahall for US Congress

Mailing Address PO Box 64

City	State	Zip Code
Beckley	WV	25802

Purpose of Disbursement
Campaign Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : SB23.5499

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. NOLAN FOR CONGRESS VOLUNTEER COMMITTEE

Mailing Address PO BOX 1041

City	State	Zip Code
BRAINERD	MN	56401

Purpose of Disbursement
Campaign Contribution

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: MN	District: 08

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : SB23.5519

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1000.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Leadership That Listens PAC

Full Name (Last, First, Middle Initial)

A. PAT MURPHY FOR IOWA

Mailing Address PO BOX 692

City	State	Zip Code
DUBUQUE	IA	52004

Purpose of Disbursement
Campaign Contribution

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State: IA	District: 01

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : SB23.5529

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. PATRICK HENRY HAYS FOR CONGRESS

Mailing Address PO BOX 94886

City	State	Zip Code
NORTH LITTLE ROCK	AR	72190

Purpose of Disbursement
Campaign Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : SB23.5535

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C. Pete Gallego for Congress

Mailing Address P.O. Box 1781

City	State	Zip Code
San Antonio	TX	78296

Purpose of Disbursement
Campaign Contribution

Candidate Name

Office Sought:	<input type="checkbox"/> House <input type="checkbox"/> Senate <input type="checkbox"/> President
State:	District:

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General <input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : SB23.5504

Amount of Each Disbursement this Period

500.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1000.00

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SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTSUse separate schedule(s)
for each category of the
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(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Leadership That Listens PAC

Full Name (Last, First, Middle Initial)

A. RECCHIA FOR CONGRESS

Mailing Address 172 GRAVESEND NECK ROAD

City	State	Zip Code
BROOKLYN	NY	11223

Purpose of Disbursement
Campaign Contribution

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: NY District: 11

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : SB23.5526

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. RON BARBER FOR CONGRESS

Mailing Address PO BOX 57715

City	State	Zip Code
TUCSON	AZ	85732

Purpose of Disbursement
Campaign Contribution

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: AZ District: 08

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : SB23.5503

Amount of Each Disbursement this Period

500.00

Full Name (Last, First, Middle Initial)

C. SCHNEIDER FOR CONGRESS

Mailing Address PO BOX 1318

City	State	Zip Code
DEERFIELD	IL	60015

Purpose of Disbursement
Campaign Contribution

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: IL District: 10

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : SB23.5518

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional)..... ►**TOTAL** This Period (last page this line number only)..... ►

1000.00

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**SCHEDULE B (FEC Form 3X)
ITEMIZED DISBURSEMENTS**Use separate schedule(s)
for each category of the
Detailed Summary PageFOR LINE NUMBER:
(check only one)

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<input type="checkbox"/> 21b	<input type="checkbox"/> 22	<input checked="" type="checkbox"/> 23	<input type="checkbox"/> 24	<input type="checkbox"/> 25	<input type="checkbox"/> 26
<input type="checkbox"/> 27	<input type="checkbox"/> 28a	<input type="checkbox"/> 28b	<input type="checkbox"/> 28c	<input type="checkbox"/> 29	<input type="checkbox"/> 30b

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NAME OF COMMITTEE (In Full)

Leadership That Listens PAC

Full Name (Last, First, Middle Initial)

A. SEAN PATRICK MALONEY FOR CONGRESS

Mailing Address PO BOX 270

City NEWBURGH	State NY	Zip Code 12550
------------------	-------------	-------------------

Purpose of Disbursement
Campaign Contribution

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: NY District: 18

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : SB23.5521

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

B. SHEA-PORTER, CAROL

Mailing Address PO BOX 453

City ROCHESTER	State NH	Zip Code 03866
-------------------	-------------	-------------------

Purpose of Disbursement
Campaign Contribution

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: NH District: 01

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : SB23.5512

Amount of Each Disbursement this Period

250.00

Full Name (Last, First, Middle Initial)

C. TIM BISHOP FOR CONGRESS

Mailing Address PO BOX 437

City FARMINGVILLE	State NY	Zip Code 11738
----------------------	-------------	-------------------

Purpose of Disbursement
Campaign Contribution

Candidate Name

Office Sought:	<input checked="" type="checkbox"/> House
	<input type="checkbox"/> Senate
	<input type="checkbox"/> President

State: NY District: 01

Disbursement For: 2014
<input type="checkbox"/> Primary <input checked="" type="checkbox"/> General
<input type="checkbox"/> Other (specify) ▼

Date of Disbursement

M M M	/	D D D	/	Y Y Y Y Y
10		28		2014

Transaction ID : SB23.5513

Amount of Each Disbursement this Period

250.00

SUBTOTAL of Disbursements This Page (optional).....▶

750.00

TOTAL This Period (last page this line number only).....▶

10750.00
